

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>7-8-05</u>		2 Serial/Patent # <u>D9/710-510</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition	None	2-1-05	\$ 1500							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 1500							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:								
	Duplicate Payment		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">8</td></tr></table>		1	8	--	0	9	8	8
1	8	--	0	9	8	8					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
TC withdrew the holding of abandonment											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Paul Shanowski</u>		TITLE: <u>Senior Attorney</u>									
SIGNATURE: <u>[Signature]</u>		PHONE: <u>571-272-3225</u>									
OFFICE: <u>Office of Petition</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>		DATE: <u>4/12/05</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

In the event issues arise as a result of the filing of this paper, or remain in the prosecution of this application, Applicants request that the Office telephone the undersigned attorney to expedite consideration of the present petition and eventual allowance of the application. Should any additional fees be required for the filing of this paper, the Commissioner is authorized to charge those fees to Deposit Account #18-0988, Docket No. AVERP2952US. In particular, if the Terminal Disclaimer fee must be paid again at this time, the Commissioner is authorized to charge this fee to the above-identified deposit account.

Respectfully submitted,

RENNER, OTTO, BOISSELLE & SKLAR, LLP

26 January 2005

By Thomas W. Adams  
Thomas W. Adams, Reg. No. 35,047

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Adjustment date: 04/12/2005 CKHLOK  
02/03/2005 MAHMEI 00000029 09710510  
01 FC:1453 -1500.00 DP

Repin-Ref: 04/12/2005 CKHLOK 0013084600  
DAH:180988 Name/Number:10420249  
FC: 9204 \$1500.00 CR